

Rec'd fm

HAVERSTOCK & OWENS LLP
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Sunnyvale, California 94086
(408) 530-9700
Customer No.: 28960

Applicant of: Yonhua Tzeng
10/772,740
Filed: February 5, 2004
Entitled: **METHOD OF PLASMA ENHANCED CHEMICAL VAPOR DEPOSITION OF DIAMOND
USING METHANOL-BASED SOLUTIONS**
Group Art Unit: 1762
Examiner Name: Stouffer, Kelly M.

MAIL STOP RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Sir:

This is a Request for a Continued Examination (RCE) under 37 CFR § 1.114 of the above-identified application.

CERTIFICATION UNDER 37 CFR § 1.08

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to : Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, Mail Stop RCE, October 31, 2007.

Miriam Freeman
(Name of Person Mailing Paper)

Miriam Freeman
Signature

1. Submission required under C.F.R. § 1.114

a. Previously submitted

- Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____.
(Any unentered amendment(s) referred to above will be entered)
- Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- Other _____

b. Enclosed

- Amendment/Reply
- Affidavit(s)/Declaration(s)
- Information Disclosure Statement (IDS)
- Other _____

2. Miscellaneous

a. Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months.
(Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)

b. Other _____

c. Applicant is entitled to small entity status

4. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

a. The Director is hereby authorized to charge the following fees, or credit any overpayments to Deposit Account No. 08-1275.

- RCE fee required under 37 C.F.R. § 1.17(e)
- Extension of time fee (37 C.F.R. § 1.136 and 1.17)
- Other one new independent claim

b. Check in the amount of \$535.00 (\$405.00 to cover the Request for Continued Examination Filing fee plus \$130.00 for a one new independent claim)

c. Payment by credit card (form PTO-2038 enclosed)

5. Return Receipt Postcard

Dated: October 31, 2007

By: Jonathan O. Owens
Name: Jonathan O. Owens
Registration No.: 37,902

Repln. Ref: 11/05/2007 HDESTA1 0010271500
Date: 08/12/75 Name/Number: 10772740
FC: 9204 \$25.00 CR

405.00 OP
105.00 OP

11/05/2007 HDESTA1 00000070 10772740
01 FC:2801
02 FC:2201